



**STATE OF TENNESSEE
DEPARTMENT OF HUMAN SERVICES
www.state.tn.us/humanserv/**

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED. IT ALSO TELLS YOU HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

IF YOU HAVE QUESTIONS ABOUT THIS LETTER, PLEASE CALL 1-888-863-6178. IN DAVIDSON COUNTY, PLEASE CALL 313-5790. TTY#1-800-270-1349.

A new federal law called **HIPAA** says we must keep facts about your health private. It also says we must give you this notice. Here are the rules that we must follow to keep facts about your health private. These rules can change. If important changes are made, we will tell you.

WHO WILL FOLLOW THIS NOTICE:

This notice describes the rules for the Department of Human Services ("DHS") and for others who work with us. The people who work with us include:

- All employees, staff and other personnel of DHS
- TennCare
- The State of Tennessee
- The Federal Government
- Your health care providers

DHS will share facts about you to:

- Make sure you get the medical treatment you need;
- Get payment to your doctors;
- Check on our program to be sure you get the benefits you are entitled to;
- Help if anyone is in danger due to his health or safety;
- Report cases of abuse or neglect;
- Tell you about appointments and other information;
- Obey laws on workers' compensation;
- Check how health programs are working.

We might also share facts about you with:

- Your family or others involved in your health care. You may ask us not to tell them your information. We will agree if we can. If you are a minor child or in an emergency, we may not be able to agree;
- The Court when the law says we must or are ordered to do so;
- Law enforcement officers;
- Public Health agencies to update records for births and deaths or to track diseases;
- Government agencies.

RIGHTS ABOUT YOUR HEALTH INFORMATION

You have the right to:

- See your health records;
- Get copies of your health records;
- Talk to us about how we use and share your health information;
- Ask us to change health information that you think is wrong. You must ask us to change it in writing and tell us why. We may not be able to change it, we will tell you why.
- Ask us for a list of who gets your health information after April 14, 2003. You must ask us in writing. But, if we have your okay to give it out, we do not have to give you a list. Or, if we use it to help you get health care, help with payment for your care, or to run our program, we do not have to give it to you.
- Ask us not to share some facts about your health information. You must ask us in writing. You must tell us what facts you don't want shared. You must tell us who you don't want us to share those facts with. But, there may be some times when we cannot agree to your request. We will tell you why.
- Take back your okay to share your health information. If you signed an authorization form, you can take it back any time. But, you must do it in writing. This will not change any facts we have already shared.
- Ask us to contact you in a different way or at a different address. You must tell us in writing.
- Ask for a new notice of DHS's privacy practices.

QUESTIONS or COMPLAINTS

Do you have questions? Do you have a complaint about your right to privacy? You can call or write one of these offices to ask questions or make a complaint. You will not lose your eligibility if you complain or ask a question.

Department of Human Services, Office of General Counsel, Compliance Officer, Citizens Plaza Building, 400 Deaderick Street, Nashville, TN 37248, or call at 615-313-4700.

Office of Civil Rights, Medical Privacy, Complaint Division, U.S. Department of Health and Human Services, 200 Independence Avenue, SW, Washington, DC 20201, or call at 866-624-7748.

